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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/753,119

Filing Date

January 6, 2004

First Named Inventor

HOFFBECK, Loren John

Art Unit

1638

Examiner Name

FOX, David T.

Attorney Docket Number

P06284US01 - PHI 1327C

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached \$500 (Appeal Brief) \$120 (1-Month Extension of Time)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 Missing Oath/Declaration	If any fees have been inadvertently omitted, please charge those fees to Deposit Account No. 26-0084	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

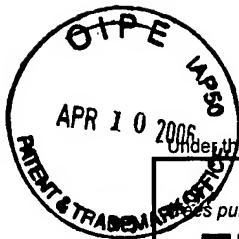
Firm Name	MCKEE, VOORHEES & SEASE, P.L.C., CUSTOMER NO. 22885		
Signature			
Printed Name	ROBERT A. HODGSON		
Date	APRIL 10, 2006	Reg. No.	56,375

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I hereby certify that this document and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service in an envelope as "Express Mail Post Office to Addressee" addressed to: Commissioner of Patents, Mail Stop: PATENT APPEAL, P.O. Box 1450, Alexandria, VA 22313 prior to 5:00 p.m. on the 29th day of March, 2006.			
Signature			
Typed or printed name	PATRICIA E. WILSON	Date	April 10, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL For FY 2005 <small>Effective on 12/08/2004. As pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		Complete if Known	
		Application Number	10/753,119
		Filing Date	January 6, 2004
		First Named Inventor	HOFFBECK, Loren John
		Examiner Name	FOX, David T.
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1638
TOTAL AMOUNT OF PAYMENT (\$) 620.00		Attorney Docket No.	P06284US01 - PHI 1327C

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 26-0084 Deposit Account Name: McKee, Voorhees & Sease, P.L.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17	
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FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		SEARCH FEES		EXAMINATION FEES			
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>	
Utility	300	150	500	250	200	100	_____	
Design	200	100	100	50	130	65	_____	
Plant	200	100	300	150	160	80	_____	
Reissue	300	150	500	250	600	300	_____	
Provisional	200	100	0	0	0	0	_____	
2. EXCESS CLAIM FEES								
<u>Fee Description</u>						<u>Small Entity</u>		
						<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent claims						360	180	
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
- 20 or HP = _____ x _____ = _____					<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20								
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
- 3 or HP = _____ x _____ = _____								
HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____								
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)							_____	
<input checked="" type="checkbox"/> Other: APPEAL BRIEF AND PETITION & FEE FOR EXTENSION OF TIME (1 MONTH, LARGE ENTITY)							\$620.00	

SUBMITTED BY			
Signature		Registration No. 56,375 (Attorney/Agent)	Telephone 515-288-3667
Name (Print/Type)	ROBERT A. HODGSON		Date APRIL 10, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Patricia E. Wilson
Patricia E. Wilson
Express Mail Label # EV 654039902 US

Commissioner for Patents
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on 4/10/06
Date

Robert A. Hodgson

Signature

ROBERT A. HODGSON

Typed or printed name of person signing Certificate

56,375

515-288-3667

Registration Number, if applicable

Telephone Number

1. Brief on Appeal with Exhibits (1-8)
2. Related Proceedings Appendix (3)
3. Petition and Fee for Extension of Time Under 37 C.F.R. § 1.136(a)
4. Check for \$620.00

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

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